

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Checksmart Financial LLC Political Action Committee

ADDRESS (number and street)

7001 Post Road

Suite 200

Dublin

OH

43016

Check if different  
than previously  
reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00433805

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M / D D / Y Y Y Y Y Y  
11 08 2016in the  
State of

OH

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M / D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y  
10 01 2016

through

M M / D D / Y Y Y Y Y Y  
10 19 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Roman, Bridgette, Caryn, ,

Type or Print Name of Treasurer

Signature of Treasurer

Roman, Bridgette, Caryn, ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
10 27 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
10 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
10 / 19 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">236273.79</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">185904.99</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">5752.69</span>	<span style="border: 1px solid black; padding: 2px;">80707.41</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">191657.68</span>	<span style="border: 1px solid black; padding: 2px;">316981.20</span>
7. Total Disbursements (from Line 31).....	<span style="border: 1px solid black; padding: 2px;">21650.00</span>	<span style="border: 1px solid black; padding: 2px;">146973.52</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<span style="border: 1px solid black; padding: 2px;">170007.68</span>	<span style="border: 1px solid black; padding: 2px;">170007.68</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

Checksmart Financial LLC Political Action Committee

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 10 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y  
 10 / 19 / 2016
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

3547.69

68048.41

(ii) Unitemized .....

205.00

4659.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

3752.69

72707.41

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

3752.69

72707.41

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

2000.00

8000.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

## 19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) .....

5752.69

80707.41

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

5752.69

80707.41

# **DETAILED SUMMARY PAGE** of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	173.52
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	173.52
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	109000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	19150.00	37800.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	21650.00	146973.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21650.00	146973.52

# **DETAILED SUMMARY PAGE** of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3752.69	72707.41
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3752.69	72707.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....▶	0.00	173.52
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	0.00	173.52

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Barber, Lisa, , ,

Mailing Address 1345 S. Kolb Road  
Apt 317

City  
Tuscon

State  
AZ

Zip Code  
85710

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Auditor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7281

Amount of Each Receipt this Period

20.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Beatty, Josh, T., ,

Mailing Address 7317 W. Montgomery Rd

City  
Peoria

State  
AZ

Zip Code  
85383

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7274

Amount of Each Receipt this Period

50.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Bushman, Timothy, , ,

Mailing Address 2014 NE 2nd Street

City  
Blue Springs

State  
MO

Zip Code  
64014

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7282

Amount of Each Receipt this Period

20.00

☐ Memo Item  
single payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶

90.00

TOTAL This Period (last page this line number only).....▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Chapman, William, , ,**

Mailing Address 848 Gummer Court

City  
Reynoldsburg

State  
OH

Zip Code  
43068

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Director of Loss Prevention

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7261**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Cruz, Eunice, , ,**

Mailing Address 8030 W. Black Eagle Ct.

City  
Tucson

State  
AZ

Zip Code  
85757

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7277**

Amount of Each Receipt this Period

30.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Fisher, Jennifer, , ,**

Mailing Address 6000 Falling Rain Ct.

City  
Elk Grove

State  
CA

Zip Code  
95757

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

2970.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7268**

Amount of Each Receipt this Period

165.00

☐ Memo Item  
single payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

395.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Fox, Amanda, , ,

Mailing Address 5522 Westerville Crossing Drive

City

Westerville

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Director of Training

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7271

Amount of Each Receipt this Period

100.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Fryer, Steven, , ,

Mailing Address 1742 Ridgewood Circle

City

Lawrenceberg

State

IL

Zip Code

47025

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3958.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7257

Amount of Each Receipt this Period

208.33

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Grenko, Robert, , ,

Mailing Address 3402 East Laurel Lane

City

Phoenix

State

AZ

Zip Code

85028

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7262

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

SUBTOTAL of Receipts This Page (optional).....▶

508.33

TOTAL This Period (last page this line number only).....▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Grieser, Robert, , ,**

Mailing Address 6315 Moore Road

City  
Delaware

State  
OH

Zip Code  
43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Vice President - Government Affairs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3971.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7256

Amount of Each Receipt this Period

209.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Heitzman, Robert, , ,**

Mailing Address 4331 Vista Walk Lane

City  
Powell

State  
OH

Zip Code  
43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Director of Store Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7263

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Howiler, Stacy, , ,**

Mailing Address 383 Coldwell Court

City  
Gahanna

State  
OH

Zip Code  
43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7272

Amount of Each Receipt this Period

100.00

☐ Memo Item  
single payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

509.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 27  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Ipp, Jon, , ,**

Mailing Address 4950 S County Rd 300 E

City  
Liberty

State  
IN

Zip Code  
47353

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7264**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Jones, Chris, , ,**

Mailing Address 14932 Mercury Lane

City  
Huntertown

State  
IN

Zip Code  
46748

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
District Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7278**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Kirk, Eric, , ,**

Mailing Address 1440 SouthWabash Avenue, #407

City  
Chicago

State  
IL

Zip Code  
60605

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7265**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

425.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 27

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Lake, Richard, D, ,**

Mailing Address 4681 Fernway Drive

City  
North Port

State  
FL

Zip Code  
34288

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Vice President of Store Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1900.00

Date of Receipt

10 / 14 / 2016

Transaction ID : SA11AI.7273

Amount of Each Receipt this Period

100.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Mulkey, Sally, , ,**

Mailing Address P.O. Box 161

City  
Orient

State  
OH

Zip Code  
43146

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Director of Internal Collections Op's

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

10 / 14 / 2016

Transaction ID : SA11AI.7279

Amount of Each Receipt this Period

25.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Nash, Lou, , ,**

Mailing Address 7065 Stillwater Cove

City  
Westerville

State  
OH

Zip Code  
43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Chief Recovery Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

4116.60

Date of Receipt

10 / 14 / 2016

Transaction ID : SA11AI.7254

Amount of Each Receipt this Period

228.70

☐ Memo Item  
single payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

353.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Nordmoe, Brian, , ,**

Mailing Address 1647 Minturn Drive

City  
New Albany

State  
OH

Zip Code  
43054

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Accounting Department Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11Al.7285**

Amount of Each Receipt this Period

12.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. O'Brien, Sean, , ,**

Mailing Address 7135 Scioto Road

City  
Dublin

State  
OH

Zip Code  
43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11Al.7275**

Amount of Each Receipt this Period

50.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Reisinger, Larry, , ,**

Mailing Address 731 Steeplechase St.

City  
Delaware

State  
OH

Zip Code  
43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Regional Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11Al.7266**

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

262.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Roman, Bridgette, Caryn, ,**

Mailing Address 8825 Dunsinane Drive

City  
Dublin

State  
OH

Zip Code  
43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
General Counsel/Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3952.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7260**

Amount of Each Receipt this Period

208.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Rubesteck, Robert, , ,**

Mailing Address 1605 Clarence Avenue

City  
Lakewood

State  
OH

Zip Code  
44107

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Regional Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7280**

Amount of Each Receipt this Period

25.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Solomon, Lance, D., ,**

Mailing Address 2847 Lochgreen Way

City  
Dublin

State  
CA

Zip Code  
94568

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Vice President- Special Projects

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

3958.27

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 14 / 2016

**Transaction ID : SA11AI.7258**

Amount of Each Receipt this Period

208.33

☐ Memo Item  
single payroll deduction

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

441.33

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Torres, Enrico, , ,**

Mailing Address 3580 Ballantree Place

City  
Dublin

State  
OH

Zip Code  
43016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Director of Store Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3958.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7259

Amount of Each Receipt this Period

208.33

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. Vittorini, Lisa, , ,**

Mailing Address 4248 Vista Walk Lane

City  
Powell

State  
OH

Zip Code  
43065

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Director of Compliance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7267

Amount of Each Receipt this Period

200.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. Winslow, Timothy, , ,**

Mailing Address 3127 Stouenburgh Dr

City  
Hilliard

State  
OH

Zip Code  
43026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
Checksmart Financial LLC

Occupation (for Individual)  
Ass't General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7276

Amount of Each Receipt this Period

50.00

☐ Memo Item  
single payroll deduction

SUBTOTAL of Receipts This Page (optional)..... ►

458.33

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. Zingg, Jerome, , ,**

Mailing Address 4670 Pine Tree Court

City  
Westerville

State  
OH

Zip Code  
43082

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Checksmart Financial LLC

Occupation (for Individual)

Senior VP Management Information Sys

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1995.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2016

Transaction ID : SA11AI.7269

Amount of Each Receipt this Period

105.00

☐ Memo Item  
single payroll deduction

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

105.00

3547.69

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 27

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. KYRSTEN SINEMA FOR CONGRESS**

Mailing Address PO BOX 25879

City  
TEMPE

State  
AZ

Zip Code  
85285

FEC ID number of contributing  
federal political committee.

**C** C00508804

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**10** / **19** / **2016**

**Transaction ID : SA16.7299**

Amount of Each Receipt this Period

2000.00

☐ Memo Item

Refund of contribution (check #527)

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

2000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. MIKE CRAPO FOR US SENATE**

Mailing Address PO BOX 1948

City  
BOISEState  
IDZip Code  
83701Purpose of Disbursement  
Campaign Contribution

011

Category/  
Type

Candidate Name

**CRAPO, MICHAEL, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: ID District: 00

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C C00330886

**Transaction ID : SB23.7306**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

**TOTAL** This Period (last page this line number only).....▶

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Brenner for Ohio**

Mailing Address 15 West Central Avenue

City  
DelawareState  
OHZip Code  
43015Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Brenner, Andrew, , ,**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

**Transaction ID : SB29.7339**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Butler for Ohio**

Mailing Address 2321 Miami Village Drive

City  
MiamisburgState  
OHZip Code  
45342Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Butler, Jim, , ,**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

**Transaction ID : SB29.7341**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Citizens for Bishoff**

Mailing Address 2902 Braden Way

City  
BlacklickState  
OHZip Code  
43004Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Bishoff, Heather, , ,**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

**Transaction ID : SB29.7350**

Amount of Each Disbursement this Period

350.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1350.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Citizens for Duffey**

Mailing Address 645 Farrington Drive

City  
WorthingtonState  
OHZip Code  
43085Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Duffey, Mike, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

**C****Transaction ID : SB29.7340**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Citizens for McColley**

Mailing Address 15 Lemans Drive

City  
NapoleonState  
OHZip Code  
43545Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

**C****Transaction ID : SB29.7329**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Citizens for Niraj Antani**Mailing Address 8547 White Cedar Drive  
#321City  
MiamisburgState  
OHZip Code  
45342Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Antani, Niraj, , ,**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

**C****Transaction ID : SB29.7342**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Citizens for Obhof**

Mailing Address 5206 Crown Pointe Drive

City  
MedinaState  
OHZip Code  
44256Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

C

**Transaction ID : SB29.7317**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Citizens for Perales**

Mailing Address 2766 Chatham Court

City  
BeavercreekState  
OHZip Code  
45431Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Perales, Rick, , ,**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

C

**Transaction ID : SB29.7358**

Amount of Each Disbursement this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Committee for Jim Hughes**

Mailing Address 14 East Gay Street

City  
ColumbusState  
OHZip Code  
43215Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

**Hughes, Jim, , ,**Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

C

**Transaction ID : SB29.7326**

Amount of Each Disbursement this Period

750.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2100.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Committee to Elect Sean J. O'Brien**

Mailing Address 7337 Sharon Warren Road

City  
BrookfieldState  
OHZip Code  
44403Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7322**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Elect DeVitis Committee**

Mailing Address 660 Singley Avenue

City  
AkronState  
OHZip Code  
44310Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7351**

Amount of Each Disbursement this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Bill Reineke**

Mailing Address 122 Sunny Lane

City  
TiffinState  
OHZip Code  
44883Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7331**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1600.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Gary Scherer**Mailing Address 19920 Commercial Point Rd  
P.O. Box 123City  
CirclevilleState  
OHZip Code  
43113Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Scherer, Gary, , ,**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

**C****Transaction ID : SB29.7337**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of John Eklund**

Mailing Address 12040 Burlington Glen Drive

City  
ChardonState  
OHZip Code  
44024Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

**C****Transaction ID : SB29.7307**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Jonathan Dever**

Mailing Address P.O. Box 43276

City  
MadeiraState  
OHZip Code  
45243Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

**Dever, Jonathan, , ,**Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2016

FEC Identification Number

**C****Transaction ID : SB29.7328**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Lou Gentile**

Mailing Address 500 Luray Drive

City  
WintersvilleState  
OHZip Code  
43953Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7320**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Lou Terhar**

Mailing Address 5595 Boomer Road

City  
CincinnatiState  
OHZip Code  
45247Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7313**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Mike Henne**

Mailing Address 8447 Diamond Mill Road

City  
ClytonState  
OHZip Code  
45315Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7352**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Friends of Nickie Antonio**

Mailing Address 1305 Belle Avenue

City  
LakewoodState  
OHZip Code  
44107Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7338**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Ryan Smith**

Mailing Address 63 Cedar Street

City  
GallipolisState  
OHZip Code  
45631Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7336**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Wes Rutherford**

Mailing Address 350 Ashley Brook Drive

City  
HamiltonState  
OHZip Code  
45013Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7355**

Amount of Each Disbursement this Period

250.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Hackett for Ohio**

Mailing Address 2050 Palouse Drive

City  
LondonState  
OHZip Code  
43140Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7315**

Amount of Each Disbursement this Period

750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Hambley for House Committee**

Mailing Address 2820 Grafton Road

City  
BrunswickState  
OHZip Code  
44212Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7348**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LaTourette for Ohio**

Mailing Address P.O. Box 76

City  
Chagrin FallsState  
HIZip Code  
44022Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

**Transaction ID : SB29.7345**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1750.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Checksmart Financial LLC Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Manning for Ohio**

Mailing Address 7064 Avon Belden Road

City  
North RidgevilleState  
OHZip Code  
44039Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.7343

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Romanchuk for Representative**

Mailing Address 3306 Oakstone Drive

City  
MansfieldState  
OHZip Code  
44930Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

**Romanchuk, Mark, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.7353

Amount of Each Disbursement this Period

350.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Seitz for Ohio**

Mailing Address 4401 Abby Court

City  
CincinnatiState  
OHZip Code  
45248Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

**Seitz, Bill, , ,**

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	0			1	1			2	0	1	6		

FEC Identification Number

C

Transaction ID : SB29.7323

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

1850.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Checksmart Financial LLC Political Action Committee

Full Name (Last, First, Middle Initial)

**A. Sprague for State Representative**

Mailing Address 220 West Sandusky Street

City  
FindlayState  
OHZip Code  
45840Purpose of Disbursement  
Campaign Contribution to State (Ohio) Candidate

011

Category/  
Type

Candidate Name

Sprague, Robert, , ,

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

Transaction ID : SB29.7333

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Team Burke**

Mailing Address 275 West 4th Street

City  
MarysvilleState  
OHZip Code  
43040Purpose of Disbursement  
State Candidate Contribution (Ohio)

011

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
10		11		2016

FEC Identification Number

C

Transaction ID : SB29.7319

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

19150.00